236121 ... P. 003/013

Telephone: 704-309-4330 Pikeview Rd Fax: SC 24715-6704 Other: Email: KSLS1094 & Comporium: net Information contained herein neither replaces nor supplements the filing and service of pleadings or other papers is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must
Email: KSLS1094 @ Compositum net
nformation contained herein neither replaces nor supplements the filing and service of pleadings or other papers
is referred for any of the parties commission of position for the barbons of gestermis and unrea-
NATURE OF ACTION (Check all that apply)
A Restricted Request for Name Change on Certificate
axi Request to Amend Scope of Authority
Charter Request to Amend Tariff (rate increase, etc.)
Charter Bus Request to Amend Passenger Limit
Non-Emergency Request
Stretcher Van Exhibit
dousehold Goods Late-Filed Exhibit
lazardous Waste
Proposed Order CLERICS OF C
o Comply with Order Publisher's Affidavit
ting Authority to Obtain a Certificate and Necessity to be Rescinded Reservation Letter Response
n of Certificate Return to Petition
Other: Please expedite
A CHICA PIECE CAPERITY
Idousehold Goods Late-Filed Exhibit APR Letter Proposed Order CLERICS OFFICE Comply with Order The Comply with Order Reservation Letter Response Comply to be Rescinded Response

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

Date: H-11-12
CLASS C - CHARTER
Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.
1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name Larry smith box. Car Service
3290 Pikeview Rd Fort Mill SC 29715-67
Mailing Address of Applicant if different from street address
704-309-4330 Phone Fax
KSLS 1094 D comporium, net Email Address
2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)
3. Select Entity Type: (Check one) Individual Owner/Sole Proprietorship
Partnership - List names and address of all person having an interest in the business.
Corporation - List names and addresses of two principal officers.

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance	at Time Applica	ation is F	iled:
Month	April		2012

Assets: Cash Receivables Real Estate Buildings and Equipment (Net) Motor Vehicles (Net) 44583,00 Garage Equipment (Net) Machinery and Tools (Net) Supplies on Hand Prepaids and Other Assets 7426,88 **Total Assets** Liabilities and Equity: Accounts Payable Notes Payable Mortgages Payable **Equipment Obligations** Accrued Salaries and Wages Other Accrued Obligations \$ 1800.00 insurance (columbia Ins (o) Other Liabilities Total Liabilities W1800.00 Capital Stock Retained Earnings **Total Equity** Total Liabilities and Equity \$1800.00

PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and C	Charges (List only maxim	<u>um charges per mile c</u>	or trip, and/or hourly rate):
K . oo)		

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.				
Abbeville	Cherokee	Florence	Lee	Saluda
Aiken	Chester	Georgetown	Lexington	Spartanburg
Allendale	Chesterfield	Greenville	Marion	Sumter
Anderson	Clarendon	Greenwood	Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	Williamsburg
Barnwell	Darlington	Horry	☐ Newberry	☐ York
Beaufort	Dillon	Jasper	Oconee	
Berkeley	Dorchester	Kershaw	Orangeburg	Statewide
Calhoun	Edgefield	Lancaster	Pickens	
Charleston	Fairfield	Laurens	Richland	

DESCRIPTION OF EQUIPMENT

You are **not** required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

	n Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped s based on the number of seatbelts in the vehicle, including the driver's seatbelt.)
X 1	-7 Passengers, including driver
<u> </u>	3-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT
Lincoln	99 Town Car	1L1FM81W9XY670798	3 4015
		·	

04/03/2012 03:36 18035483332

SHELDON-ENTERPRISES

#0800 P.003 /003

INSURANCE QUOTE
This form MUST BE COMPLETED AND SIGNED by an AUTHORIZED INSURANCE COMPANY REPRESENTATIVE
The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.
insurance policies may be required. Do not provide a copy of insurance policies unless requested.
The following insurance quote is for:
Larry Smith DBA Five Star Town Car Service Name of Motor Carrier
Name of Motor Carrier
3290 Pike View Rd. Fort Mill SC 29715 Address of Motor Carrier
Address of Motor Carrier
Amount of Premium: Limits Onoted: (See Below)
Liability Insurance \$ 1500,000 Limits
The above quoted premium is for a term of 12 months.
Minimum Limits - Intrastate Only:
1-7 Passengers S 25,000/50,600/25,000
8-15 Passengers \$ 25,000/100,000/25,000
Columbia Insurance Company Name of Insurance Company
Name of Insurance Company
3024 Home Office Address of Company
I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quots meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the
South Carolina Department of Insurance to do business in South Carolina.
4-4-12 Brown Brown
Date Authorized Insurance Company Representative's Signature

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact Vickie Coker with the Department of Motor Vehicles at (803) 896-8457.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tex, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

M-5444 (01/2010)

FORM E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

(EXECUTED IN TRIPLICATE)

Filed with	South Carolina Publ	c Service Commission	(herei	nafter called Commission)
	(Name of Commissi	on)		
This is to cert	tify, that the	Columbia i	nsurance Company	
	- · · · · · · · · · · · · · · · · · · ·		of Compвлу)	-
(hereinafter called	Company) of	3024 Harney	Street, Omaha, NE 8	9131
•		(Home Office	Address of Company)	
has issued to	LARRY	SMITH DBA FIVE STAF	TOWN CAR SERVE	~=
			f Motor Carrier)	<u> </u>
of		3290 PIKE VIEW ROA	D EODT MILL BC 2	274 <i>E</i>
			of Motor Carrier)	
			•	
	of insurance effective from	04/05/2012	12:01 A.M. standa	rd time at the address of
the insured stated	In sald policy or policies and co	ntinuing until cancelled a	s provided herein, wh	ich, by attachment of
tne Unitorm Motor	Carrier Bodily Injury and Proper	rty Damage Liability Insur	rance Endorsement i	has or have been
emended to provid	le automobile bodily injury and p	property damage liability (nsurance covering the	e obligations imposed
upon such motor o	arrier by the provisions of the m	otor carrier law of the Sta	ate in which the Comr	nission has jurisdiction
or regulations pror	nulgated in accordance therewit	h.		•
Managar	Name of the Community	formation of the second		
policies and all and	uested, the Company agrees to dorsements thereon.	turnish the Commission	a duplicate original of	said policy or
policida ali di di				
This certificate	and the endorsement describe	d herein may not be cano	selled without cancelle	ation of the nallow
to which it is attach	ed. Such cancellation may be	effected by the Company	or the insured giving	thirty (30) days' notice
n writing to the Sta	ate Commission, such thirty (30)	days' notice to commend	e to run from the dat	e notice is actually
received in the offic	ce of the Commissioner.			•
Countersigned at	3024 Harney Street	Omaha	NE	68131
	(Street Address)	(City)	(State)	(ZIP Code)
his	4th	day of April	20 12	
		day orApril		- ·
			To Be	
			ps last	us/
			Authorized Repre	nentative.
			ratiiotized (tepie	SCHOOL C
				•
nsurance Company	File No. 71APR271564	<u> </u>		
•	(Policy Number	er)		

1,500,000 CSL

This form determined by the National Association of Regulatory Utilities Commissioners and promulgated pursuant to the provisions of Section 202(b)(2) of the Interstate Commerce Act (49 U.S.C. § 302[b][2]) and 49 CPR § 387.301

M-5445 (01/2010)

FORM F UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY INSURANCE ENDORSEMENT

It is agreed that:

- 1. The certification of the policy, as proof of financial responsibility under the provisions of any State motor carrier law or regulation promulgated by any State Commission having jurisdiction with respect thereto, amends the policy to provide insurance for automobile bodily injury and property damage liability in accordance with the provisions of such law or regulations to the extent of the coverage and limits of liability required thereby; provided only that the insured agrees to reimburse the company for any payment made by the company which it would not have been obligated to make under the terms of this policy except by reason of the obligation assumed in making such certification.
- 2. This endorsement may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be effected by the company or the insured giving thirty (30) days notice in writing to the State Commission with which such certificate has been filed, such thirty (30) days notice to commence to run from the date the notice is actually received in the office of such Commission.
- The Uniform Motor Carrier Bodily Injury and Property Damage Liability Certificate of Insurance has been filed with the State Commission indicated below:

X – Indicated State Commission with whom Uniform Motor Carrier Bodily Injury and Property Damage Liability Certificate of Insurance has been filed.

Alabama	lilinois	Montana	Rhode leland	
Algeka	Indlang	Nebraska	South Carolina	X
Arizona	Jowa .	Neveda	South Dakota	
Arloznene	Kanaga	New Hampshire	Tennassee	
California	Kentucky	New Jarsey	Texts	
Colorado	Louisiana	New Mexico	Utah	
Connecticut	Maine	New York	Vermont	
Delaware	Maryland	North Carolina	Viminia	
District of Columbia	Massachusetts	North Dakota	Washington	
Fiorida	Michigan	Ohio	West Virginia	
Georgia	Minnesota	Okaihoma	Wisconsin	
Hawaii	Mississippi	Oregon	Wyoming	
Idaho	Missouri	Pennsylvania		

(The attaching clause need be completed only when this endorsement is issued subsequent to preparation of the policy.)

Attached to and forming part of policy No.	71APR271	654			
issued by Columbia Insurance Company		180	_	· · · · · · · · · · · · · · · · · · ·	, herein called
Company, of 3024 Harney Street, Omaha, N	IE 68131				
To LARRY SMITH DBA FIVE STAR TOWN	of_8C,	FORT MILL	,		
Dated at Omaha, NE	this	5th	day of	April	, 20 <u>12</u>
•	Counter	signed by		Authorized Repres	entative

This form determined by the National Association of Regulatory Utilities Commissioners and promulgated pursuant to the provisions of Section 202(b)(2) of the interstets Commerce Act (49 U.S.C. § 302[b][2]) and 49 CFR § 387.301.

W Yes

O No

Exhibit FWA

harry Bruce Smith 1. Are there currently any outstanding judgments against the Applicant? O Yes If Yes, indicate nature of judgement(s) against applicant. 2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations? Yes. O No 3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

Exhibit on Driver Qualifications

Whburgur audetatar	inds that all drivers must be a minimum of to yours or age.
Yes	O No
and such record fro	nds that a certified copy of the driver's three (3) year driving record issued by the SC DMV om the DMV of the state in which the driver is or has been domiciled for such period must be Applicant's business office.
Yes	○ No
must be maintained	nds that a criminal history background check from the state where the driver currently lives in the Applicant's business office.
Yes	○ No
Applicant understar their possession wh state of residence o	nds that all drivers operating a vehicle under a Class C Charter Certificate must have in nen operating a charter vehicle, a valid driver's license issued by the SC DMV or the current of the driver.
⊗ Yes	○ No
vehicles to drivers	nds that all Class C Charter Certificate holders are prohibited from employing or leasing who are registered, or required to be registered, as sex offenders with the South Carolina ment Division or any national registry of sex offenders. No
	Applicant understar and such record frobe maintained in the Yes Applicant understar must be maintained Yes Applicant understar their possession what is the residence of the Yes Applicant understar their possession what is the residence of the Yes Applicant understar their possession what is the residence of the Yes Applicant understar their possession what is the Yes Yes

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA POST OFFICE DRAWER 11649 COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOU	UTH CAROLINA)) 	Josep	B	Sme	S	
			C		Applican	t's Signature		
	ı							
Ī	Name of Applic	<u></u> B ちr	nith		DW	ner		_
1,						Title		•
of	Five	Star	Town	Car	Servi	ce		
			Apı	olicant				-
	t for the Certifica I statements cont					in the forego	oing, swear or	
					.0	1		
				TO THE	15	Lyone	₹	_
				Signati	ure of Appli	cant's Repres	sentative	

This 9th day of April 2012

Lidy Diana Summerous

Notary Public

Commission Expires 4-14-19

OFFICE OF REGULATORY STAFF TRANSPORTATION DEPARTMENT 1401 MAIN STREET, SUITE 900 COLUMBIA, SC 29201 04/11/2012

Janice,

We were recently advised by Patty Vowel that we need permits, class c charter, stickers, etc. to operate our town car business in the state of SC.

Up to this point we have been unaware of such needs. If we had known earlier we would have taken care of this immediately.

Enclosed Is the Class C Charter application.

We would humbly ask If you would expedite this application process as this is a busy time for us and we have customers waiting for us to get this all approved.

Your consideration in this matter is greatly appreciated.

Thank you,

Kitty Smith

company: Larry B. Smith dba Five Star Town Car Service